	OIP	PART B	s - FEE(S)	TRA	NSMITTAL		24	
Complete and send	this form, together w	2			Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885	r Patents	F	
INSTRUCTIONS: This form chould be very for transmissing the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate All further correspondence including the public advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected to over or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address.								
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 05/10/2006					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Michael I. Kroll 171 Stillwell Lane Syosset, NY 11791					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
08/15/2006 FFANAIA3 00000055 10634097					MyCHAS [(Depositor's name)			
MAD AD DD					<u> </u>	10 0b	(Signature)	
01 FC:2501	700.00 UF					10100	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/634,097 TITLE OF INVENTION: P	ORTABLE FLUSHING AP	PARATUS FOR M	OTOR VEHIO	CLES				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700			\$0	\$700	08/10/2006	
EXAMINER		ART UNIT		CL	ASS-SUBCLASS	J		
STINSON, FRANKIE L		1746			134-123000			
1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the pa	atent) :	☐ Individual ☐ C	orporation or other private gr	roup entity Government	
4a. The following fee(s) are Vissue Fee 030 Publication Fee (Nos	b. Payment of Fee(s) A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO 2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
_ *	(from status indicated above				James alaimin Child	LI ENTITY distance Sec 27.0	SER 1 27(a)(2)	
The Director of the USPTO	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ion Fee (if any) or to re-apply any previously paid issue fee to the application identified above.							
NOTE: The Issue Fee and P	ublication Fee (if required) vords of the United States Pate	will not be accepted	d from anyone	other th	nan the applicant; a reg	istered attorney or agent; or t	the assignee or other party in	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Date

Registration No.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Authorized Signature

Typed or printed name